

CONCORD POLICE DEPARTMENT

RELEASE OF LIABILITY RIDE-A-LONG PROGRAM

In consideration of permission to accompany Concord City police officers during the performance of their official duties and permission to ride in a City of Concord owned motor vehicle, specifically police patrol vehicles, I do hereby agree to refrain from interfering with said officer(s) and be subject to their orders as to how I shall conduct myself while accompanying said officer(s). I do further release the City of Concord, the Concord Police Department, and said police officer(s) from any and all claims, damages, or rights of action I may suffer while engaged in such activities. PROVIDED, HOWEVER, that in the event I should be deputized by any officer, pursuant to state law, and follow their commands as a deputized citizen, then my rights and protection shall be the same in all events as that of any other deputized citizen following the commands of a police officer. Additionally, I understand that all information from internal police documents and records, including information on individuals or investigations that might be acquired as a result of my association with the Concord Police Department will remain strictly confidential.

I further understand, as stated on the application page, that the Concord Police Department will request from the proper authorities, a local criminal history and driver's history, and have my permission to do so.

In Case of Emergency Notify:

Name (print)

Address

Phone (home) (business)

Signature of Participant

Authorizing person's signature

Comments: _____

Ride Assignment:

Officer

Shift/Date

District

If previous ride, last date



CONCORD POLICE DEPARTMENT
RIDE – A – LONG PROGRAM

APPLICATION TO PARTICIPATE

Last

First

Middle

Physical Street Address of Residence

City

State

Zip Code

Driver License # / State Issued: _____

Social Security #: _____ Date of Birth: _____ Age: _____

How did you learn of this program? _____

Are you personally acquainted with an officer of the Concord PD? _____

If so, which officer? _____

Have you ever been charged with or convicted of any criminal offense? _____

If Yes, what offense? _____

What was the disposition / outcome? _____

Has your driving privileges ever been revoked? _____

Have you ever been charged with a driving offense that could have resulted in revocation of your driving privileges? _____

I certify that the above information is correct. The Concord Police Department has my permission to request from the proper authorities a local criminal history and driver's history in connection with this application.

Participant's Signature

Telephone Number(s)

Date

Approved: _____ Date: _____ Denied: _____ Date: _____ If denied, attach reason